

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Conservatives Fund			FEC IDENTIFICATION NUMBER ▼ C C00448696		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY					
Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 22 / 2014		
Mailing Address PO Box 388			Amount 400.80		
City Alexandria		State VA	Zip Code 22313-0388		
Purpose of Expenditure IE-Sasse-Online Processing		Category/ Type 		Transaction ID : E2473E074C5C24A51915 Date of Disbursement or Obligation MM / DD / YYYY 03 / 22 / 2014	
Name of Federal Candidate Benjamin E Sasse			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NE		
Calendar Year-To-Date Per Election for Office Sought 95662.27			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Alliance Strategies Group Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 24 / 2014		
Mailing Address 7700 Congress Ave Ste 3208			Amount 8487.20		
City Boca Raton		State FL	Zip Code 33487-1358		
Purpose of Expenditure IE-Sasse-Email List Rental		Category/ Type 		Transaction ID : E78EE28607F654EB89D5 Date of Disbursement or Obligation MM / DD / YYYY 03 / 31 / 2014	
Name of Federal Candidate Benjamin E Sasse			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NE		
Calendar Year-To-Date Per Election for Office Sought 104149.47			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			8888.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Paul Kilgore</i>			Date MM / DD / YYYY 03 / 31 / 2014		

[Electronically Filed]